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The Alcoholism Foundation Of Alberta

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In addition to their own full-scale clinical and other activities, the Edmonton and Calgary centres of The Alcoholism Foundation of Alberta offer a complete program of regional educational and referral services on a province-wide basis.

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SOCIAL RESPONSIBILITY

by RICHARD LASKIN, Ph.D.

Richard Laskin is originally from New York City where he obtained his B.A. at City College, and subsequently his M.A. and Ph.D. at Pennsylvania State University. Dr. Laskin taught at Miami University of Ohio, and at Brandon College, Manitoba. He was previously Research Associate at the Centre For Community Studies in Saskatoon, and is currently Assistant Professor of Sociology at the University of Alberta (Edmonton campus), and Research Associate at The Alcoholism Foundation of Alberta. Dr. Laskin is editor of a new book, SOCIAL PROBLEMS: A CANADIAN PROFILE, soon to be released by McGraw-Hill.

IN A STREET poll conducted in an American city in 1960, people were asked whether they agreed or disagreed with the statement: "The alcoholic has no one to blame for his troubles but himself." It is reported that about two-thirds of the respondents agreed with the statement, and about one-third disagreed. Just a few weeks ago, 260 adult Albertans in three different northern communities (High Prairie, Peace River and Grande Prairie) were

asked to respond to the same statement. A dozen persons could not decide, but of the 248 who did voice an opinion exactly half agreed that the alcoholic was solely to blame for his condition, and half disagreed.

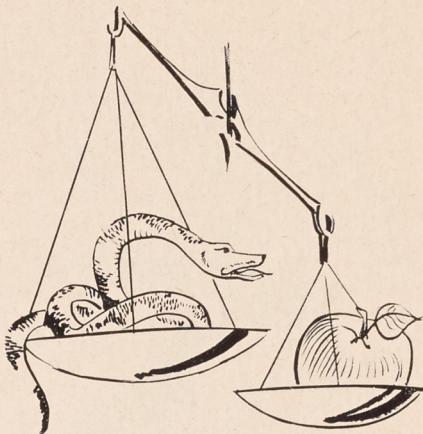
Although the sample of Albertans referred to here does not necessarily represent the Province as a whole, it is probably not very far from being a representative sample. The 50-50 split in opinion on the question applied equally to women as to men,

but when a comparison was drawn between those interviewed who have a reputation for 'influence' or 'leadership' in the community, and those who do not, the 'influentials' (who are somewhat better educated, and who have a generally higher socio-economic position in the community) were somewhat less likely to put the responsibility for the alcoholic's troubles entirely on the alcoholic himself.

Agreement or disagreement with the statement reflects very different beliefs about the nature of human behaviour, and suggests diverse approaches to what should be society's reaction to deviant behaviour. When a person agrees that, "the alcoholic has no one to blame for his troubles but himself", he is saying something like, "we are all the masters of our own fate", or that man has the power, through his 'freedom of the will' to choose his own course in life. He can work or not, marry or not, steal or not, and drink or not. He cannot will to do the impossible, but neither is he 'forced' to do what he chooses no to do (with the possible exception of the proverbial death and taxes). His 'will' is the primary moving or causal force, and he is therefore personally responsible (i.e., to blame) for his situation, his actions, and their consequences.

To disagree with the statement that we have only ourselves to blame is to imply that behaviour is at least partly, and perhaps wholly, determined by forces beyond the individual himself. This deterministic point of view has been stated in a variety of ways, from 'fatalism' (que sera, sera—what will be, will be) to the acceptance of the idea of 'extenuating and mitigating circumstances', ("I didn't *want* to do it, but I *had* to under the circumstances").

For centuries men have debated the essential issue of 'free will versus determinism. Philosophers



theologians and others, have variously believed either that man is (1) the 'victim of fate' (kismet, it is written in the stars, etc.), or (2) that he freely wills his behaviour, or (3) that he exists in a mechanistic sort of universe in which he is just part of a great chain of endlessly related events, and his personal life is determined by the forces in that universe which act upon him at any point in time and space. Philosophies representing any number of variations of these positions have been offered. St. Augustine, in about the fifth century of Christianity, argued that, while it is apparently illogical, man does have complete freedom to will his actions while at the same time God, in His omniscience, has foreknowledge of everything and every action.

The implications of the 'free will versus determinism' debate are great. If man can do as he wills, more or less regardless of 'circumstances', and is consequently personally responsible for his actions, then society's reactions to his behaviour, be they punishment, treatment, or whatever, will be directed toward him as a person. If responsibility lies elsewhere then the reactions might logically be directed



elsewhere, that is, at the cause, as responsibility is, in the final analysis, a function of cause. So, for example, if a man is failing to perform his work satisfactorily, and we discover that he has tuberculosis, we are not likely to hold him, as a person, responsible for the failure; but we react against the disease 'causing' his inability to perform. The same would be the case for any other physical or mental illness.

When we believed that the mentally ill person was 'possessed', we endeavoured to 'beat the devil out of him'. If a man committed suicide we buried him at a crossroads, with a wooden stake through his heart,

directing all our attention at him. He did it, he was responsible, he was evil, or possessed by evil; and we, his fellow men, conveniently absolved **ourselves** from any responsibility, or causal role. Of course, we might say that the man 'was driven to it', but we were surely not going to hold the 'drivers' responsible. Even Socrates, in his death cell, was required to drink his poison 'freely' so that it might be said that he took his own life: **he did it, not we.**

The deterministic point of view tends to differentiate 'responsibility' and 'accountability'. This is not merely toying with semantics. One may be held accountable for one's actions, without being in whole, or even in part, responsible. So we confine the tubercular patient to a sanatorium, the leper to permanent isolation, but we don't necessarily hold them responsible for their condition.

The determinist seeks to discover the chain of causal events, and the relative power of the links in that chain. He believes that the concept of 'free will' is essentially a fiction, invented to explain that which we might otherwise not be able to understand. It is a non-scientific attempt to explain ignorance through even greater ignorance. To suggest an analogy, when men were unable to understand the nature of that hot, flickering, yellow-orange stuff that appeared whenever something burned, they named it 'Phlogiston', the essential ingredient of fire, and the problem was 'solved'.

It should be pointed out that 'determinism' is NOT the same as 'fatalism' for, while the latter posits that an occurrence is foretold or destined prior to its happening, and **regardless** of preceding conditions, determinism simply argues that an occurrence is the necessary outcome, or effect, of a particular set

of circumstances, or causes. With regard to human behaviour, these circumstances include both physical and social environment, biological factors and personality.

It is likely that the 'free will versus determinism' controversy will never be settled, not in this generation at any rate. Some say that the motivation to act is rooted entirely, or almost entirely, in man's ability to 'choose', more or less regardless of external conditions; others, that his behaviour is essentially a function of a multitude of differently weighted external and internal stimuli. It becomes foolish to argue these points of view against one another because, first of all, each is itself a premise, and second, the same evidence can be used to 'prove' each side of the issue.

Considering the above, it is not surprising to find that there is no consensus in a random population interview as to whether or not the alcoholic is himself to blame for his conditions, as agreement or disagreement is essentially an acceptance of the free will or the deterministic point of view. If one believes that man acts according to his own will, that he "can resist temptation if he wants to", that he has to have "lots of will power", then he puts the blame or responsibility, for a condition like alcoholism on the individual alcoholic. However, if one assumes that man, as an actor, does not or cannot act independently of all of the social and psychological forces that act upon him, that all of his behaviour is, in the final analysis, a function of his personality reacting in a socio-psysical situation, then one would put the 'blame' for an undesirable (or, and this is most important, a desirable) situation on some definable pre-existent set of circumstances, which, by their nature, determine or cause that which follows.

Most of us tend to be both 'free-willers' and 'determinists'. That is, we use the frame of reference most convenient at the time. If we do well, we say, "See what I did". If we do poorly, we say, as does the convicted down-and-outer standing before the bar of justice, "Judge, it ain't my fault, I just ain't never had a chanct". We take pride in the success of those around us because we have helped to contribute to (determine?) their success, but we shun the failures as if they were none of our concern.

An apt illustration of the significance of these comments appears in the field of criminology and corrections. In the earliest societies men reacted against crime in an amazing assortment of methods of action, always on the assumption that they knew what caused the evil of crime. These causes were usually seen to lie outside of the organization of the society itself; either in the processes of the super-natural world, through magic or some other form of spiritualism, or as a function of some biological condition. In more recent times psychological conditions have been included as well, but, from primitive to modern times the tendency has been to put the blame on some non-social cause, or, at best, on some specific unusual social factor, like the 'broken home'.

The explanation of criminal and delinquent behaviour is complicated and difficult. The 'explanation' of alcoholism is hardly less confusing. At least three disciplines are involved in the search for the cause (etiology) of this condition. Of course, we can say that alcoholism is the result of drinking, but that is hardly more meaningful than saying that sex is the cause of sex crimes, or money the cause of stealing. And to say that people become alcoholics because they haven't the 'will to resist' is equally inadequate.

The field of medicine (the physiological approach) is one discipline presently involved in alcoholism research. Alcohol is a chemical which has a particular series of effects on the body. Involved are such processes as anesthesia, physiological tolerance, and bio-chemical addiction. But, as with many other diseases, the somatic approach does not yield the whole story of etiology, and psychiatry and psychology provide other necessary insights. While certain illnesses are caused by agents which enter the body in a manner imperceptible to the affected individual, alcohol is taken knowingly. We want to know why he drinks to excess, but another does not. Part of the answer is certainly to be found in terms of the nature of the person as a biological and psychological entity. But because every man is a **social** being, we must also search beyond the individual for part of the explanation of his behaviour. Hence we utilize the sociological approach as well.

A person does not 'instinctively' acquire the alcohol habit. Nor does it emerge mysteriously from the depths of his psychic being. Rather it is **learned**, just as language is learned, or gluttony, or poker playing, or interior decorating, or anything else that humans do. The learning takes place in the context of the social system in which the person lives, and is necessarily a function of that system, within the potentialities and limits of each individual.

The dramatic effects of the cultural differences of different societies on alcoholism are well documented. The French drink relatively heavily, and their alcoholism rates are high. The Italians also consume fairly large amounts, but the patterns of when and why they drink are different, and they consequently have considerably less alcoholism.

The Jewish culture involves the use of alcohol in many situations, yet alcoholism among the orthodox Jews is almost non-existent. And many fundamentalist Protestant groups eschew the use of alcohol entirely; hence they have no alcoholism problem at all. There must be much more to the problem than whether the individual has the 'will to resist' or not!

Who, or what, then, is to blame for the problems of the alcoholic? If there is such a thing as a 'physiological predisposition' toward alcoholism in some people, then that is partly to blame. But are alcoholics the only people with this condition, and do all such persons (if this condition exists) become alcoholics? The answer to both questions is no. The relationship between alcoholism and any mental disorder, neurosis or what have you, is equally vague. Such a condition may contribute to, but does not explain, alcoholism.

It was pointed out earlier, with regard to criminal behaviour generally, that we tend to take pride in the successful members of our society, but to shun the failures, as if we had nothing to do with their failure. We feel justified in taking partial credit, as members of our society, for the accomplishments of our great musicians, scientists, statesmen and so forth. "Just look what we have produced", we say. But when we observe the drug addict, the prostitute, the murderer—or the alcoholic—we say: "Now whatever could have caused that? He must be an evil, weak-willed person."

What folly! These persons are as much the failures of our society as the others are its successes. To the extent that we take pride in the one, we must take responsibility for the other. If our fine educational system, our democratic way of life, and our other cultural achievements have

Some significant changes in the very nature of our social system will have to be considered before we can expect any real progress in the struggle against alcoholism. A meaningful step in that direction would be the acceptance, by every member of our society, of the fact that, as supporters of this society and its institutions, we do indeed share in the responsibility for its problems, including the problem of alcoholism.



helped to determine the success of some of our members, then our unequal system of economic distribution, our racial prejudice, our often ruthlessly competitive system and our faltering family institution, to cite only a few illustrations, make us responsible for a good proportion of what we should indeed refer to as **our** alcoholism problem. New drugs will help, and more and better psychological counselling will be welcomed, but these are directed mainly at the end product of this social problem.

YOUTH AND ALCOHOL USE

PART 1

by GEORGE L. MADDOX, Ph.D.

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*"Young people do not invent the idea of either drinking or abstaining;
they learn it."*

Research is making it increasingly less necessary to speculate about what young people are thinking about, and what they are doing with alcohol.

EVERY SOCIETY stakes its life on the assumption that its youth are being prepared to become competent and responsible participants in community life. Since young people are both a living commentary on the generation that rears them and a prophecy about the generation that will inherit the future, many adults in our society continually view with interest and occasionally alarm, what young people are thinking and doing; the state of their health, education, and welfare; and any real or imagined indications of their incompetence or irresponsibility.

It is hardly surprising that we adults, who number our alcoholics and the cost of our misuses of beverage in the multiple millions, frequently look with some apprehension at what young people are saying about and doing with alcohol.

For years now parents, ministers, educators, legislators, editorialists, and civic officials have exercised

their right to speculate, with undetermined accuracy, about the drinking behaviour and attitudes toward drinking among youth. There has not always been agreement among the speculators about whether contemporary young people should be indicted for a premature and too realistic imitation of adult drinking behaviour or commended for not imitating this common facet of adult activity.

There is still room for argument about whether praise or blame is warranted. Fortunately, however, research is making it increasingly less necessary to speculate about what young people are thinking about and doing with alcohol.

In the past two decades there have been a number of research studies which describe and provide a factual basis for interpreting the drinking behaviour and attitudes of adolescents, those persons who fall in the broad, loosely defined age range bounded on the one hand by puberty, and, on the other, by the assumption of adult roles. Over ten thousand young people living in various regions of the country have been involved in these investigations.



On the basis of cumulative research evidence here, in general, is what we know about drinking behaviour and attitudes among contemporary adolescents:

1. The probability is quite high a young person will have experimented with at least one drink of alcohol before he is graduated from high school or reaches the age at which he would normally graduate.

2. First exposure of an individual to personal use of alcohol, in contrast to merely 'tasting' an alcohol beverage, tends to occur about the time he is in junior high school or enters high school. A limited amount of 'tasting' and ritual use of alcohol may occur before this time, but repeated personal use of alcohol before puberty is not common.

3. First exposures to personal use of alcohol are more likely to be in the context of the home with the parents or other relatives present than in other situations.

4. Beer is the most frequently consumed beverage; this choice seems to reflect both the availability

and relative economy of this low alcohol content beverage.

5. If the parents in a family use beverage alcohol, the probability is that their adolescent children will also be or become users; and this probability increases with the age of the young person. Abstinent young people, on the other hand, typically have abstinent parents.

6. The proportion of users (those whose drinking involves more than a single isolated experience or ritual use of alcohol) among young people varies from community to community. In some communities majorities of six or eight in ten adolescents are users. In other communities only minorities of two or three in ten are users. Therefore, one cannot talk about the drinking behaviours or attitudes of teen-agers in general. This is also indicated by the next proposition.

7. Among young people, as among adults, the probability that an individual will be a user varies with such factors as sex, socio-economic status, religious preference and participation, ethnic back-



ground, and rural-urban residence. Users are more likely than others to be male, at the extremes of social status, identified with a religious or ethnic sub-culture which permits or encourages some use of beverage alcohol, and residing in an urban area.

8. Young people tend to perceive some use of alcohol as an integral part of adult role playing, particularly in situations in which adults are being convivial, celebrating a special event, or seeking symptomatic relief from tension and anxiety.

9. The probability that an adolescent will be a user of beverage alcohol increases with age; that is, as he approaches the achievement of adult status.

10. Young people tend to perceive alcohol as a social beverage rather than as a drug; they tend to emphasize in their descriptions of drinking what alcohol does for an

individual at least as often as they emphasize what it may do to him.

11. Parental approval of some drinking experience for young people, especially if that drinking is in the context of the home, is frequently claimed by adolescent drinkers. The frequency of these claims varies from community to community and is presumably related to perceiver differences in the degree to which alcohol use is integrated into the normal social activities of adults.

12. Unqualified moral, religious, and legal injunctions against all use of alcohol as a beverage by minors are supported neither by the attitudes nor the behaviour of young people. Only a minority of the adolescents who have been studied, even when they themselves are abstinent, consider alcohol use to be morally wrong for their peers under all circumstances, much less for adults. Although legal restraints

may have effects, as yet undemonstrated, on where, when, and how alcohol is consumed, such restraints seem to have little effect on whether or not alcohol is used by adolescents.

13. The great majority of young people, even if they use beverage alcohol, do not appear to be pre-occupied with drinking. Problems associated with use are not typical. The young person who drinks as often as an ounce a day; who is high, tight, or drunk with regularity; or who experiences repeated personal and social complications in association with drinking is not common. Estimates of the proportion of young people whose drinking is associated with personal or social problems vary from community to community and range from two to five percent.

14. While some peer group drinking among adolescents may reflect rejection of and hostility toward adult values and roles, such drinking behaviour is not typical. On the contrary, most drinking by adolescents appears to be anticipatory of adult role playing and in conformity with perceived adult values. Tension is likely to develop not around the question of whether or not it is legitimate for an individual who has 'come of age' to drink but, rather the question of when an individual has, in fact, 'come of age'.

This, then, is the kind of information we have about what contemporary young people are thinking about and doing with alcohol. The essence of available research data seems most adequately expressed in a single conclusion: young people do not invent the idea of drinking (or abstaining); they learn it.

The acceptability and desirability of some drinking behaviour is continually suggested to a young person by the elaborate integration of



alcohol use into American culture and adult social behaviour. A majority of adults in the United States drink at least sometimes; research indicates that the proportion of drinkers (about two out of three) and the drinking patterns of adults have remained relatively stable for the past two decades. Children on the other hand, are generally assumed to be abstinent. Any attempt to explain the persistence of adult drinking behaviour necessarily focuses attention on when and how the abstinence of childhood is transformed for the majority into the drinking behaviour of adulthood.

An individual is born with the potentiality for becoming a social being. But whether and how this potentiality is developed and channeled are largely matters of learning. An individual's expectations, his attitudes, and his behaviour are developed through contact with adult members of the species over a long period of time. His responses to persons and other objects and events in his external environment can be adequately understood only as one understands the traditional

meanings which persons, objects and events come to have for him as a result of interacting with those persons who are significant in his experience. The individual never views the external world entirely free from the influence which these culturally defined and socially shared meanings and expectations come to have for him.

The system of traditionally defined meanings which serve as potential guides for behaviour and which are shared with other members of a group is the phenomenon which we label culture. In becoming a social being, the individual may be said to be enculturated or socialized. He learns to play roles appropriate to a wide variety of social situations. When socialized individuals not only share role expectations about behaviour but also sanction conformity to these shared expectations, behaviour patterns are said to be institutionalized. From this point of view most drinking behaviour can be understood best as an aspect of culture, that is, as shared expectations about behaviour. The use or non-use of alcohol is learned, institutionalized behaviour for particular groups within the society and integrally related to a number of rules.

The availability of alcohol to members of a society does not in itself explain its use or non-use as a beverage. Whether one drinks and what, how, where, when, and with whom one drinks are institutionalized behaviour for particular groups within the society. Although alcohol use is obviously a part of the cultural tradition of the United States, so also is abstinence. And, while some drinking is obviously institutionalized for some persons in some groups, whether one is encouraged, permitted, or forbidden to drink reflects such social factors as ethnic background, socio-economic position, religious orientation, age, and

sex. Some uses of beverage alcohol are institutionalized among Orthodox Jews, for example; total abstinence is institutionalized among Mormons. Drinking is generally more permissible for the male than for the female and for the adult than for the adolescent. Therefore, in being socialized the individual is never exposed to culture in general; he is exposed to particular groups whose members introduce him to the institutionalized roles appropriate for him in that group. The male child, for example, does not learn only how to be a man; he must also learn what it means to be a child as distinct from an adult, or perhaps, what it means to be white in contrast to Negro; middle class or lower class; Presbyterian or Baptist. He must learn whether or not drinking is ever appropriate; and, if it is, when, where, with whom, and to what extent it is appropriate. An individual's drinking behaviour, if he drinks at all, typically conforms to the expectations of significant groups in his social environment.

Adolescence is of particular relevance in understanding the emergence of drinking or abstinent behaviour in our society because it is obviously the transition between childhood roles and adult roles. The boundaries of introduction to this age-grade comes with puberty, i.e. about age twelve to fifteen; it is informally terminated by the assumption of adult-like responsibilities such as marriage, a full-time job, or entrance into the armed forces, normally upon graduation from high school at about age nineteen or formally by attaining the age of twenty-one. Adolescence, therefore, is roughly synonymous with the teen years and with participation in the junior and senior high school grades of our educational system. The precise determination of biological ages equivalent to the beginning and end of adolescence is neither

possible nor relevant. What is important is the recognition that, in our society, adolescence is a transitional age-grade in which the individual is not any longer a child but yet not an adult. Literally the adolescent is in the process of becoming an adult; he is permitted and increasingly required with age to 'play at' the institutionalized role behaviour associated with adulthood. The adolescent, consequently, learns the attitudes toward the uses of beverage alcohol appropriate to adulthood as he has come to understand what it means to be an adult generally.

The perceived integration of some alcohol use into the style of life of many significant adults in the experience of most young people explains, at least in part, why one would expect and why one finds that among adolescents, the probability of alcohol use—as well as of smoking and heterosexual activity—increases with age, reaching its maximum degree about the time of graduation from high school. In our



society graduation from high school is the point at which a majority of young people have assumed or will soon assume adult responsibilities associated with a full-time job, marriage, or entrance into the armed forces. One or more of these roles are likely to be assumed before the young person has reached the age of twenty-one, the age we usually associate with the end of adolescence.

(Part 2 will appear in the December issue.)

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"The purpose of education is to comprehend, the purpose of education is to see the connection between cause and effect, the purpose of education is to penetrate complexities."

—Norman Cousins

What you are
is God's gift to you;
what you become
is your gift to God.

—Anonymous

Time wounds all heels.

—Anonymous

Alcoholism ranks among the four major health threats, along with cancer, mental illness and heart disease.

Rehabilitation, education and community services are the greatest forces operating today for the control and prevention of alcoholism in the home, on the job and in the community.

Let us make haste to live, since every day to a wise man is a new life.

—Seneca

PREVENTION OF ALCOHOLISM CAN BEGIN IN THE CLASSROOM

by VILMA E. UJLAKI

Vilma E. Ujlaki, B.A. (Sociology), B.S. and M.A. (Education) with post graduate work at Marquette University, Milwaukee, is an education specialist. She has lectured in Education at Oberlin College and has supervised student teachers in Oberlin, Ohio, public schools. Miss Ujlaki is a member of the Research Committee of the Association for Childhood Education, International, and is particularly interested in the advancement of teaching methods at the sensitive primary levels.



THERE IS A GROWING awareness that alcoholism is one of the most serious problems of our times. The estimated 5,000,000 victims in the United States alone come from all levels of society, and include persons of all ages, from early teens to the very old.

The causes of alcoholism are many-faceted: sociological, psychological, emotional. The medical profession now recognizes it as a problem with physiological bases. While the causes are many and vary from culture to culture and from individual to individual, no cure has yet been found.

The treatment of alcoholic patients goes on nevertheless. Alcoholism programs offer effective rehabilitative and therapeutic services to those desiring them. Extensive research studies are being conducted not only for the treatment of this problem but toward its prevention. To date, however, only limited progress has been made in this all-important endeavor.

The increase in excessive teen-age drinking is an added burden to the already serious problem of adult alcoholism. As a classroom teacher, I am concerned about it. We know that the home is often blamed for many of our personal and social

problems. In what ways have the schools contributed to this one? What can teachers do to provide more effective preventive education to our students and so help alleviate this problem?

It is an accepted fact that, next to the home, the school is the most influential institution in the life of every child. Although his many pre-school experiences have already predisposed him to certain behaviour patterns, attitudes and personality structures, there are still enough of the formative years remaining where the school can play a very important part in re-directing and re-channeling some of these undesirable traits into healthier and more acceptable ones both for the individual and for society.

The human personality is capable of change at any age, and while the school can be successful in initiating some desirable changes, the home, nevertheless, will continue to have great influence throughout the life of the child. Significant as the home may be, I am convinced that the influence of the school can be very important. If the individual can be reached early enough, and if his sense of values can be improved, the results could contribute toward the solution of this problem.

What is the responsibility of the school in alcoholism prevention? Surveys show that alcoholism education has been part of health education programs in our (U.S.) schools for many years. It is also indicated that it has been generally ineffective in preventing the increase of problem drinking among teenagers. Recent figures indicate that about six percent, or one out of every fifteen of our teen-agers, will become an alcoholic sometime in the future. Although instruction has been available about the harmful effects of alcohol, investigations now show that their ineffectiveness can



be attributed to the fact that these programs were, in effect, simply products of the temperance movement of the early part of this century in our country. Its purpose failed in the schools as it had failed in the country at large.

So, both home and school must bear the responsibility for the alarming rise in alcoholism, especially among the young people. On the average, every alcoholic affects at least four other people, including the children. The Committee on Alcoholism of the American Medical Association says that the drinking patterns of young people closely approximate those of their parents. In fact, they seem to be predetermined by them. The study of this committee also reveals that young people begin drinking in their early teens and usually with the knowledge and consent of the parents.

While this aspect in non-alcoholic families can be considered a good thing, other studies indicate that children of alcoholics, when compared with children of non-alcoholics, are more susceptible to the disease. Reports show that more than half of the alcoholics have come from families where one or both of the parents have been addicted to alcohol.

That the school has contributed to this problem is evidenced by the ever-increasing number of school drop-outs. These young people, under-educated and inadequately trained to meet the demands of today's labor market, become serious social problems. The increase teen-age crime rates is one indication. It can be pointed out that alcohol is an important factor in the commitment of crime by young people. Experts also point out that it is a significant factor in the crimes of many first offenders, and that many of these crimes would never have been committed if individuals had not yielded to criminal impulse when their restraints were lowered by intoxication.

Let us begin this discussion with a few assumptions regarding the backgrounds of children in which certain types of behaviour patterns have developed. The attitudes, values and aspirations as they have been learned at home and in the community have contributed to the particular personality syndromes of young children when they enter school for the first time. We can generalize that the home, and parents in particular, have played an important part in determining how children feel about themselves. Do they feel loved and secure, adequate and confident in themselves, positive and open to all experiences? Psychiatric reports tell us that many persons are driven to alcohol because they feel inadequate,

inferior and insecure. These traits are observable to any teacher regardless of the grade level.

It has variously been said that the teacher is the most important person in our society since the teacher affects the future of all of us in one way or another. It is therefore imperative that the teacher be first and foremost, a person whole and secure in himself. The personality traits of teachers have been studied by many experts and generally it has been found that superior teachers were first of all flexible and adaptable, adequate and confident in themselves and with others. These traits are particularly important in working with young people of all age levels. The young need patience and understanding, support and approval, love and recognition. These are basically human needs that all persons have but they are especially important to the developing physical, intellectual and spirited individuals in our classrooms.

It is especially important that children coming from homes where alcoholism and other social problems have already begun to warp their undeveloped personalities, be placed in classrooms with friendly and supportive teachers. Unfortunately, the complexities of modern life and the pressures brought on by them, affect teachers too. The interactive process between teachers and pupils often becomes difficult because of personality problems of both the teachers and the students. Many teachers often find it difficult to accept some children because of certain traits. Yet, complete acceptance is one of the essentials of the teaching profession. The teacher is expected to be both mature and willing to try various ways of helping every child.

Teachers today are considered to be the best prepared that we have ever had. More years of initial aca-

demic work are required for the new teacher; plus later in-service training continued after teaching has begun. Even so, the area of teacher education is undergoing studious investigations in order that more adequately trained teaching personnel may emerge. Our teachers today have available to them the extensive findings of research on the learning process, on the characteristics of child development, and on the general content of all the disciplines.

Although there are many superior teachers to be found in our schools at all levels, it must be contended that in many situations learning and teaching are still operating on a one-dimensional basis. While innovations abound and new gadgetry is everywhere in evidence, the process of teaching itself remains quite traditional. The same is true for expectations from the learner. While considerable improvement has been made in our schools, it has generally been in the addition of more work in the various areas. Little consideration has been given to the learner himself: what motivates him to learn for himself rather than because of what others expect of him?

In other words, the unique and individual ways of learning are not being recognized and utilized to the advantage of the learner. Too little thought is directed toward what the learner brings to the subject in relation to what the subject is supposed to bring to him. Needless to say, many learners, because of personality and environmental factors, are unable to respond, and teachers are often too busy to find ways of helping them.

This brings us to the third factor about teachers: the teacher creates the learning environment within the classroom. In this environment, each child should be able to find opportunities for self-directive activities,

for making choices, for sharing ideas and experiences with his group, and for evaluating these experiences and ideas. After creating this environment, the chief role of the teacher should be one of activating, guiding, counselling, supporting and encouraging.

In such an environment, every child is a free agent: free to develop his own potentials as he has opportunities to explore things and ideas about himself in his interactions with people. It is not an environment without discipline. By definition, a self-directive environment implies self-discipline together with responsibility both for the individual himself and for others in the group. It is an environment in which mistakes are permitted and are accepted as part of the learning process. When ideas and experiences are shared and evaluated, part of the learning process is to help children judge their strengths and determine the areas needing improvement. It is a dynamic, living situation in which children live the democratic process that prepares them to become more effective persons and participators in our kind of society.

Generally, such environments are more open-structured than traditional classrooms are. This gives students the leeway to develop their own ideas and to explore the deeper meanings of their learning. Within such an environment, time is allocated for developing needed skills and a more close-structured approach is used. A good teacher is able to determine when each method is to be employed.

Many fine public and private schools are using the above approaches. Unfortunately, there are not enough of them. Too many of our teachers are attempting, often through no fault of their own, to educate twenty-first century citizens with nineteenth century methods



and techniques. Because of over-crowded conditions in many of our schools, teachers resort to routinized, mechanical means of instruction. While some of this is unavoidable, it does not excuse anyone, least of all a teacher, from using imaginative, interesting and exciting ways of presenting material to the children.

Our technological age has reached into the classroom in both helpful and harmful ways. The introduction of teaching devices has relieved many classroom teachers of necessary but tedious tasks. On the other hand, crowding and excessive reliance on teaching machines has produced an almost dehumanized condition in many classrooms. Too many children and over-worked teachers are unable to interact as human beings. Pressures are exerted on children by parents, by teachers, by peers, as well as pressures on teachers by parents, by the school board, by administrators, to achieve, without regard to either basic human

values or to the needs, emotional as well as intellectual, of the individuals.

It is fortunate for many children that they have teachers who are adequate as persons, superior as educators and able to create learning environments in which they can thrive intellectually, socially and emotionally. Fortunate indeed are those children who have kind, understanding, warm and friendly, supportive and encouraging teachers.

Consider, however, the many thousands of children who are not so fortunate. They have been neglected by their parents and are already coping with serious personality problems at home which, added to problems in the classroom, make learning extremely difficult. It is little wonder that they are not interested in school and are frustrated in everything they do. In the case of children with alcoholic parents, these have developed their own defensive mechanisms. Some withdraw early from both parents and teachers; others display aggressive and hostile behaviour toward any or all figures of authority. Even though such attitudes and behaviour have become socially unacceptable, some of these children can be saved by some patient and understanding teacher, especially in their earlier years.

Most schools today offer guidance services to those students in need. The classroom teacher, however, is in a better position to help individual children in the immediate classroom situation. His or her observations together with pertinent information obtained from school records, affords an opportunity to help each child develop his own potential in dignity and with respect. **It is unfortunate that many adults do not think of children as persons and as such to be worthy of dignity and respect.** It is little wonder that

so many children who have experienced nothing but frustration and continuous failure grow up to be adults who feel inferior and inadequate, who become failures, and who seek escape through drinking.

I am aware that these suggestions may easily be interpreted as oversimplification of a very complex problem. I believe firmly, however, in the need and vital importance of good human interaction and compassionate human understanding for both child and adult. While considerable emphasis has been placed on helping the alcoholic himself, very little has been done to help those who are often most seriously affected by his addiction—the children of the family.

Frequently the patient himself refuses to allow the children to be involved in his therapy, and yet authorities in these programs have found that the children are often as much in need of help as is the alcohol victim himself. Group therapy has been found to be unusually effective in getting these children to discuss their problems. The friendly support and understanding of a teacher would go a long way in helping to restore their emotional balance through recovered self-assurance and feelings of worthiness.

The classroom teacher is, in many ways, the most important and influential person in our society. The hours spent each day in almost constant interactive contact must leave their effects on our lives in some way. History records many instances of important men attributing their success to some particular teacher. The same may be said of many who could otherwise have become victims of alcoholism. In today's world of fast and continuous change, when pressures are heavy on everyone, the responsibilities of teachers become even greater. May

DISTINGUISHED VISITOR

Mr. Warren E. Arnold of 15005 South Normandie Dr., Gardena, California, was a recent visitor to The Foundation.

Mr. Arnold, who has devoted more than fifty years of his life as a research chemist and pharmacologist to the study of alcoholism and drug addictions, is the originator of two adjuvant chemotherapies that have been successfully employed by clinics, sanatoria and hospitals throughout the United States.

After majoring in chemistry and allied subjects at Wayne University, Mr. Arnold passed with high honours examinations for the Registered Pharmacist's License of the State of Ohio. For six years he was Mayor of Madison, Ohio, and later became President of a number of business enterprises in his home State.

Mr. Arnold's chemotherapeutic approach to alcoholism—"Cal-Thera"—is currently being used at Beverly Lake Sanatorium in Los Angeles. Plans for the new Alcoholism Division of the Tracy Jackson Putnam Foundation in California include the use of Cal-Thera as the initial, pre-psychotherapeutic technique in the handling of drinking problems.

While in Edmonton, Mr. Arnold addressed personnel of The Foundation at the Treatment Centre and had individual conferences with many Staff members.

it be said by more and more persons in the future that, had it not been for one of their teachers, they too, would have become victim of alcohol.

Preventive education in alcoholism cannot begin too early. If it cannot start in the home, then it must begin when the child enters school. Early preventive education in this field must be based, first of all, in good human relationships. Each child must be made aware of his own worthiness and dignity. This is best done by constantly living the way we expect people to live together in a democratic society: with dignity. The classroom environment should therefore be created to provide the richest opportunities for

human learning — intellectually, socially and emotionally. The reciprocal responsibilities of the child and his society, through the development of his highest potentials, is coincidentally one of the major responsibilities of all teachers.

Solutions to the problems of alcoholism are obviously difficult. But, through the conscientious efforts of every teacher, many individuals could in future be spared from this disease. It would be a small contribution, to be sure, but in conjunction with the contributions of other institutions of society, it could lead toward the eventual prevention of this grave social problem which is now claiming millions of victims and vast material costs.

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WE MOURN

RAYMOND G. McCARTHY, M.A., M.Ed., of New Brunswick, New Jersey, Executive Director, Rutgers Summer School of Alcohol Studies; President, the North American Association of Alcoholism Programs, and of the Association for the Advancement of Instruction About Alcohol And Narcotics, died June 25th, 1964.

Formerly Research Associate, Laboratory of Applied Physiology (Education) Yale University; and Director of Alcoholism Research, New York State Mental Health Commission, Professor McCarthy participated in the First Annual Alberta Conference on Alcohol Studies at the University of Alberta (Edmonton, 1954) under the joint sponsorship of The Foundation and the University. He made continuing contributions to our work, and took a leading part in activities in the alcoholism field on both a national and international level.

Widely recognized as North America's dean of alcohol educators, Mr. McCarthy was a prolific and respected author. During the past twenty years, he wrote numerous articles on alcohol education for schools. Many of these were published in the Quarterly Journal of Studies on Alcohol (formerly Yale University, later Rutgers). His books include: "Alcohol and Social Responsibility", 1949 (in collaboration with E. M. Douglas); "Group Therapy In Alcoholism", 1950; "Problems and Recommendations", 1950 (a comprehensive report on alcoholism in Los Angeles County), 1950; "Teenagers and Alcohol", 1956, (an educators' handbook); "Drinking and Intoxication", 1959; and "Alcohol Education for Classroom and Community", 1964.

In his President's Message in the May 1964 issue of the A.A.I.A.N. Bulletin, "Ray" McCarthy summed up the scholarly humility and perseverance that characterized his life and work. He wrote: ". . . there are some new and interesting things going on in alcohol education—amidst all the old problems—and it would do us all good to hear these . . .".

Professor McCarthy's legacy to scientific research, education and literature in the alcoholism field will endure as one of the cornerstones on which the accumulating knowledge and the hopes of the future will rest. His warmth, courage and dedication will stand as his memorial in the hearts of all who knew him.





MAN: A NEED OF GOD

by ARTHUR HERZOG

Abraham Joshua Heschel, a professor at The Jewish Theological Seminary of America, and author of nearly two dozen books in four languages, has been described as "a commanding and authoritative voice in the religious life of America". Here, he tells why he believes that modern man needs both the organization of society and the dignity and mystery of religion.

ONE OF THE terrible weaknesses of modern theology is that it says, 'Me, too'. Science says something and religion says, 'Me, too'. Religion should be grateful for praise from scientists, but science can't answer ultimate questions. Religion is the way of relating oneself to the world and to God.

"Science is concerned with space, religion with time. When we think in terms of space, we seem to be masters, and we act as if everything were ours. The best way not to think about God is not to think about time. Time is the ultimate refutation of man's false sense of sovereignty."

The speaker was a medium-sized iron-gray-haired gentleman of 56 with soft eyes and a full-blown prophetic beard. His name is Rabbi Abraham Joshua Heschel, and we were seated in his tiny, book-cramped office at the Jewish Theological Seminary in New York where, since 1945. Dr. Heschel has been a professor of religion. He has become, as Reinhold Niebuhr once predicted of him, "a commanding and authoritative voice in the religious life of America". He might even be called the anti-organization man of modern religion. It is the quality, the moment of religious insight that interests him.

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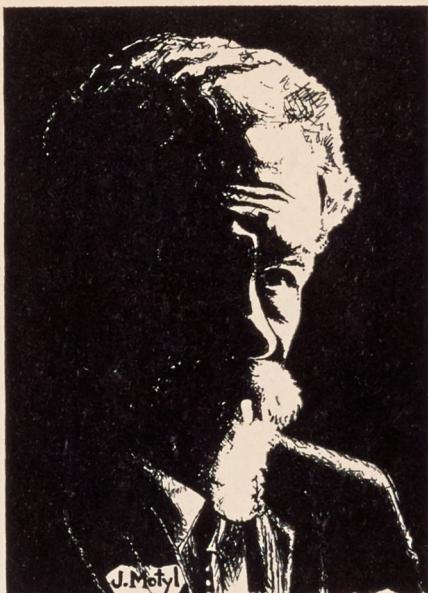
Dr. Heschel, an affable man with a shy smile, was smoking an enormous cigar which, he revealed rather impishly, was called a Spectacular and cost 15 cents. The visitor lit a cigarette in self-defense and asked Dr. Heschel to say a few words about himself.

He was born, he said, in Poland, studied in Germany, was expelled by the Nazis in 1938, and arrived eventually on these shores in March 1940. He is the author of nearly two dozen books and writes equally well in four languages—English, German, Hebrew and Yiddish. Although he teaches a few courses, he is primarily dedicated to thinking and writing; he also lectures around the country and participates in management cultural forums.

Dr. Heschel's special province is what might be called the religion of revealed experience, and his visitor asked him to talk about it.

"My major concern," he said in a gentle voice, "is the human situation. I maintain that the agony of contemporary man is the agony of spiritually stunted man, that the image of man is larger than the frame into which he has been contracted.

"The grandeur and uniqueness of man is his ability to realize that God has a stake in his existence. There is no religious existence without the realization of the mysterious involvement of the human in the divine, a realization that comes through one's sense of the ineffable, through the cultivation of a sense of wonder and mystery, of radical amazement at all being. For this, I go back to the Bible. The Bible is not a book about God. It is a book about man. Its entire story may be summarized as God in search of man"—the title, the visitor noted, of one of Rabbi Heschel's books.



Rabbi Abraham Joshua Heschel

"What I'm concerned with," Dr. Heschel went on, "is to maintain the delicate balance of reason and mystery, of disciplined expression and the sense of the ineffable. There is an inherent tension in man due to the fact that he lives on two levels."

These two levels, as Dr. Heschel explained them, are those of the known and the unknown, of reason and the soul. "The search for reason ends on the shore of the known, but modern man, in his need for expressing himself, for communicating and making scientific discoveries and exercising power, has handed himself over to what he has made. He has lost the sense for transcendence. He faces a basic challenge: how to retain the organization of society and the dignity and mystery of religion at the same time."



Dr. Heschel is a descendant of the founders of the Hasidic movement—the mystics of the Jewish faith—and his words seemed to have a core of mysticism. Was he turning his back on reason? Dr. Heschel hastened to clarify. Only idiots would derogate reason.

“We are endowed with reason as well as with openness to the mystery of being. We need knowledge. You don’t want to try to reduce man to a purely angelic nature. Man is flesh and blood. Right religion would be a healthy balance of the two sides.”

Just the same, the side of man that is being neglected in modern

life is the side that responds to the unknowable, the spiritual, and it was here that Dr. Heschel put his emphasis. Even the institutions that should be cultivating the sense of the ineffable remain tangled up in verbosity and dogmatism.

“There are three dimensions of religious existence,” Dr. Heschel said. “The first is ritual, the second is dogma, and the third can be called inner acts or moments, by which I mean the dimension of depth, the intimacy of religion, the openness to transcendence. My primary concern is not with theology, which deals with religious ritual or dogma, but with the third area, which I call depth-theology.”

“Theology has suffered often,” Dr. Heschel went on, “from a preoccupation with the dogma, the content of believing. I’m more interested in the act of believing, with what it means to believe. This, to me, is depth-theology.”

“Depth-theology seeks to meet the person in moments in which the whole person is involved, in moments which are affected by all a person thinks, feels and acts. We stay away from depth-theology because its themes are not easily captured in words, because we are afraid of vagueness, but it draws upon that which happens to man in moments of confrontation with ultimate reality. It is impossible to make explicit and yet without it, in a soul efficiently organized, a life would be devoid of its resources.”

Dr. Heschel sat back, and his visitor asked him if he wished to do away with the structure of religion altogether. Dr. Heschel shook his head.

“You need a structure. You need something to incorporate the community of believers and to maintain the traditions. You need the



accumulation of wisdom. Religion ought to be part of the community, which it achieves through being organized. But there ought to be a healthy balance, which I would put as a maximum of faith and depth-theology, and a minimum of creed. Modern religion has become too organized, too much of an institution. It offers comfort but no challenge."

Neglect of the ultimate mystery, Dr. Heschel thought, through too much attention to the form of life and not enough to its content had produced in man a flattening of his self-esteem.

Desires in Disguise

"We have underestimated man. We have underestimated his need for spiritual pride, and overestimated his other needs.

Man has become a slave to his needs. Needs have become our gods, as if they were the totality of existence. We have come to look upon the spiritual side as nothing but personal desires in disguise. A person is what he aspires to. What are the aspirations of modern man? A car, life insurance, color television. There is nothing wrong with any of these. I'm not an ascetic. But they are not the ultimate, they do not preclude higher aspirations.

"I mean joy, the sense of giving, of being out of the center, as opposed to pleasure, in which I am the center. I mean exaltation, rather than running away from oneself. I mean reverence for other people. Instead, we have the despair of modern man, who considers himself an average man. Where is the

average man? I have never seen one. We have become too modest about our own image and nature, our capacity for inner experience. We have reduced our stature. What we lack is an appreciation of the reality of inner life, of the dignity of awe and wonder and reverence."

As Dr. Heschel spoke, the visitor stole a look at the bookcases that ringed the room, noting titles such as **High Fidelity Recording Tape**, **Living with the Atom**, and the basic writings of St. Thomas Aquinas. There were also a great many thick works in leather bindings with titles in Hebrew, and the visitor chose the moment to ask Dr. Heschel, who sat cheerfully pensive, if his religious thinking was aimed at Jews only or at people of all faiths.

"It's good Biblical Jewish theology," Dr. Heschel said. "My argument, as a Jew, is that Protestantism does not always realize its roots in Hebrew Biblical tradition, which is its legacy. But what I say is meant to apply to all men. In the large sense, I'm trying to defend intellectual uniqueness in man."

He went on to say, still proceeding from the particular of Jewish tradition to the general of the condition of modern man, that he considered the Bible to be of highest intellectual relevance.

"Now you wonder if man has much to learn from the Bible and I answer, 'A great deal'. I believe the Bible is almost unknown today. It isn't a book about God, though that's how it's generally considered, but a book about man. The Bible offers a sublime answer, but unless we know the question to which it responds, we can hardly understand it. The Bible is an answer to the question, 'What does God require of man?'

God's Interest In Man

"There is only one way to define the Jewish religion—as the awareness of God's interest in man, of a covenant between God and man. Consider the prophets. Their presupposition was God's concern for man. For that reason, even a minor act of injustice was considered an outrage, because God was involved. The prophets were convinced that they were exposed mysteriously, and in an overwhelming manner, to the inspiration of God. Now how to define their claims to revelation isn't important here. What is important was the quality of their experience, proceeding from their belief that they were confronted with the love and justice of God. They were not asking, as we do now, what man demanded of God, what man should get out of life. They wanted to know what God asked of man, what life should get out of man.

"Seen in this way, religion insists upon our remaining open to the challenge of new problems. It is in perpetual need of renewal. If God is concerned with man, then man's contemporary problems are fundamentally religious in nature. In this sense, the Negro problem is a religious problem. And so are ethics in business. To be unethical, to regard justice as useful, to see it as the servant of a particular business or aim, is to define justice as the Nazis did, as that which is useful to the German people. And this, ultimately, is to deny God's interest in man.

Faith and Expediency

"Our fundamental task is to do away with equating faith and expediency. We must work for a sense of the inexpedient, which is a sensitivity to God's demand. As long as we live by standards of sheer interest, then others are afraid of us and we are afraid of them. Temptations today are more powerful than ever before because, in the complex



structure of things, there are more temptations. But ultimately the problem goes back to a different conception of the world. We need to look at the world as the Biblical prophets did, with a sense of mystery, of the ineffable in reality, of God's presence in the existence of man.

"I am hopeful. Something is changing in the intellectual community. There is a growing recognition of the sublime in man's situation. God makes no sense to people living in a dead world with a dead soul. People are finding their souls on their way to God."

Dr. Heschel's cigar was down to a stub, and the visitor rose to say goodbye. Even if one disagreed, the visitor thought, Rabbi Heschel's words were impressive and not to be ignored. On the way out, the visitor remembered a paragraph from Dr. Heschel's writings that seemed to

sum up his message: "Man is not an innocent bystander in the cosmic drama. There is in us more kinship with the divine than we are able to believe. The souls of men are candles of the Lord, lit on the cosmic way, rather than fireworks produced by the combustion of nature's explosive compositions, and every soul is indispensable to Him. Man is needed, he is a **need of God.**"

We can best prove our thankfulness to the Almighty by the way in which on this earth and at this time each of us does his duty to his fellow man.

—Theodore Roosevelt

Properly conceived, tolerance is the positive and cordial effort to understand another's beliefs, practices and habits, without necessarily sharing or adopting them.

—Joshua Loth Liebmann

WOMEN ALCOHOLICS HAVE A TOUGHER FIGHT

by MARTY M.

A distinguished lady tells how women members of A.A. can and do turn an additional problem into a brighter victory by accepting the challenge.

WOMEN ALCOHOLICS do have special problems. To begin with, the double standard works overtime for them. Even before they become alcoholic they're in a different position from men who drink. They are expected to handle it if they drink at all. "No one likes to see a woman drunk" is a phrase we've all heard ad nauseum. As a matter of fact, we don't like to see it ourselves, much less to see it in the mirror, but if we're alcoholic there isn't much choice.

There is one thing a woman usually can do about it though, and most of them do. She can do her drinking privately. She can 'hole up' and present the world with a picture of besetting headaches, practically of chronic invalidism. She can learn more about hiding her liquor in a few months of alcoholism than most men alcoholics learn in years. In the process, she also learns a great deal about hiding her true thoughts—in other words, about dishonest thinking. And finally, a great many women alcoholics learn the last retreat from possible exposure: they discover that sedatives are easily hidden, can be taken almost unobserved, and leave no smell. And that they produce the same effect as quantities of liquor . . . with ten times the danger.

Added to her own efforts to hide the fact of her alcoholism are the well-meaning efforts of her family to hide her shame—their shame—from the world. Regardless of the

fact that such efforts rarely deceive anyone, they are desperately pursued to the bitter, often fatal, end.

What, in that case, has killed these 'hidden alcoholics', these 'protected' women? Not alcoholism. Stigma.

We women who have found the answer to our alcoholic problem in A.A. have learned also that there should be no stigma attached to this alcoholic disease so many of us share. We have learned that it is nothing to be ashamed of, that it is an illness like any other, with a name and symptoms, and we have learned that we can get well.

Many of us found it almost impossible difficult to take the First Step, to admit that we were what we had considered that shameful thing, an alcoholic. What would people say? Wouldn't it be still worse than our hidden, bitterly painful pre-A.A. state? Could we possibly admit anything honestly any more? We'd been away from reality so long—we'd twisted and turned so adroitly in our speech, our actions, and in our very thoughts—could we come back? And if we tried, would they let us? Would we be acceptable? Or would the double standard work here too?

In A.A. groups where there are already a few women members, some of these early doubts can be quickly resolved. Those who dared to take the plunge early and alone

into this seeming man's world, found themselves not in icy waters, but in a warm fellowship. They in turn can take the newcomer's hand and lead her into a world where there is real equality — where all are alcoholics together, acceptable by their own admission of that fact. They can help her to feel no longer alone, a marked creature to be hidden and shunned, but a wanted and needed part of a vital, living society of her own kind.

The return to honesty is hard for all alcoholics, but for most women it is harder than for men. Everything in the pattern of a woman alcoholic has conspired to make her dishonest. It hasn't been entirely her fault; the world and its ways are much to blame. But we women can get there as well as the men—witness the number of us, good A.A. members (one in ten of our 1945 membership). We need perhaps a little more help, a little more tolerance, a little more time. We need extra education on the sedative problem, too often for us the Siamese twin of our alcoholism. We need the example and encouragement of other women, and we need to give that example and encourage-

ment to those hidden women alcoholics who need us.

Those of us who are already well and happy members of A.A. have a great responsibility in the battle against stigma. If we can freely and proudly admit our A.A. membership when there is an opportunity to do so, if we will speak at meetings whenever we can, and work with other women, we can win that battle. Women in smaller cities and towns have the toughest fight on their hands, for the smaller the community, the more monstrously big grows the ugly head of stigma, fed on ignorance, misunderstanding and gossip. Only the light of knowledge will eliminate that monster and the light of knowledge is best shed through the shining light of human example. One woman, free of her illness, happy and well and ready to tell how it was done, can perhaps set hundreds more free.

Women alcoholics are today, in ever-increasing numbers, seeking the answer to their alcoholic problem in A.A. It hasn't been easy for us to reach them, and it hasn't been easy for them to reach out to us—but it is getting easier all the time. We women are making it so.

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FUN AND FUNGICIDE

That fouled putt may not be the sole cause of the golfer's blush!

Recent reports from around the country indicate that sometimes fun and fungicide don't mix. For example, the use of a thiram preparation on the turf has caused many a nose to bloom and blush upon the green.

A close chemical relative of disulfiram ('Antabuse'), thiram can set up the typical alcohol reaction (red face, nausea) in the golfer who's had a couple just before the game.

The Journal of the American Medical Association also reported the baffling once-a-week red-faced bather. The lady bathed daily, but regularly on Sunday she had a couple of cocktails. And on Sunday she sported a crimson face. Thiram again—this time in her favorite bath soap.

Sounds a bit like Big Brother . . .

LOVE

by VERNELLE FOX, M.D.

Medical Director of the Georgian Alcoholism Clinic, Dr. Fox has also made many valuable contributions to alcoholism literature. In this brief article, the author shows perceptively and convincingly that: "The only love we can feel is that which is given. Love cannot be demanded or bought or controlled."

LOVE IS THE EXCLUSIVE possession of the person doing the loving. It is his to give or not give, governed only by how he feels. It cannot be demanded or bought or controlled by anyone else.

One of the major difficulties of many people who have alcoholism is the inability to realize this. Time and again I watch them go through a desperate process that always ends in their feeling rejected and more alone. It's a vicious snowballing process. The more they feel alone and rejected, the more they demand love and the more they feel rejected.

Oh, it's a subtle process and the people involved seldom understand the trap they're in. You don't have to understand a trap to feel it! The patient, like all the rest of us, wants and needs to feel loved. Usually he is full of self-doubt and guilt feelings and, therefore, not at all sure that anyone could love him. This creates a desperate feeling that pushes him to demand, in a million little ways, love and attention. When he demands evidence of love from those around him and they try to give it to him, he doesn't believe it.

Since these expressions of love are in response to his demands, he's not quite sure that they are genuine. This increases even more his need to be proven to that he's loved. This goes on and on until the one from whom love is being demanded feels

crowded and controlled and will instinctively push the loved one away. So everyone is frustrated. The patient finds what he suspected in the first place. "They don't really want me, they push me away." This wife, or whoever it is, is equally frustrated because she loves him and wants to show it. But love is something that must be given and she cannot give it if he's always taking it away from her before she gets a chance.

Many people feel that the ones they love do not love them. What they don't realize is that they themselves lack the external security to allow themselves to be loved. Again the only love we can feel is that which is given to us. That which we extort is not satisfying. If this same man could sit back and wait a little, his wife could show him that she loves him. He needs to give her room to move in as it were.

Have you ever really watched a baby? We could all take lessons from him. He's a past master at "suffering himself" to be loved. He crawls around in his own busy little world, but if you notice he's got one eye on you all the time. Practically nobody can resist his indifferent charm. You just feel compelled to love him a little. He obviously eats it up and it makes you feel good to see how he enjoys your affection and attention. But when the time comes that you must put him down, he goes back to crawling

around in his own busy little world—quite secure that you or somebody else will very shortly feel compelled to love him a little. He can wait because he knows that people have just as great a need to give love as they have to be loved.

Someone doesn't love you because you have earned it or demanded it—or even because you're lovable. They love you out of their need to give love. On the other hand, it comes voluntarily, not when it's in response to your demands.

This article, originally published in *The New Life*, is reprinted by permission of the author who is Medical Director of the Georgian Alcoholism Clinic.

SMOKE GETS IN . . .

It would appear that science has recently uncovered a deeper truth reminiscent of the old song, "Smoke Gets In Your Eyes".

A recent press dispatch from Los Angeles indicates that non-smokers in the same room with smokers share some of the same blood vessel effects from inhaling the tobacco smoke of others.

Dr. Travis Winsor, a prominent University of Southern California heart specialist, measuring the adequacy of blood circulation in various parts of the body, found that the constriction of blood vessels in the fingers of non-smokers was nearly as high as in the smokers.

No man can tell whether he is rich or poor by turning to his ledger. It is the heart that makes a man rich. He is rich according to what he is, not according to what he has.

—Henry Ward Beecher

PSYCHEDELICS (Hallucinogens)

*Give me a button of wild peyote
To munch in my den at night,
That I may set my id afloat
In the country of queer delight.*

*So ho! it's off to the land of dreams
With never a stop or stay,
Where psychiatrists meet with fairy
queens
To sing a roundelay.*

*Give me a flagon of mescaline
To wash o'er my mundane mind,
That I may feel like a schizophrenic
Of the catatonic kind.*

*So hey! let in the visions of light
To banish banality,
Then will I surely catch a sight
Of the Real Reality.*

*Give me a chalice of lysergic
To quaff when day is done,
That I may get a perceptual kick
From my diencephalon.*

*So ho! let all resistance down
For a transcendental glance
Past the super ego's frosty frown
At the cosmic underpants.*

*Give me a pinch of psilocybin
To sprinkle in my beer,
That my psychopathic next-of-kin
May not seem quite so queer.*

*So hey! it's off for the visions
bizarre,
Past the ego boundary,
For a snort at the psychedelic bar
Of the new psychiatry.*

—F. W. HANLEY, M.D.

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STUDENT RESEARCH ACTIVITIES

by CYRIL C. O'BRIEN, Ph.D.

Director of Research

The Alcoholism Foundation of Alberta

ELEVEN STUDENTS currently enrolled at the University of Alberta, and two from out-of-province universities, have been participating in a variety of projects on alcoholism and problem drinking during the summer months.

In keeping with the truly multi-disciplinary and interdisciplinary natures of the alcoholisms, a wide range of topics have been included on the roster of subjects. By and large, the projects undertaken would of necessity be termed 'applied research' in contradistinction to 'basic research'. The latter is designed primarily for scientific knowledge with no specific application of any findings in mind when such basic research is first undertaken.

The summer research topics at The Foundation have in each instance a practical application in view whether or not the concern is with a new therapeutic approach in counselling, a study associated with liver cirrhosis resulting from problem drinking, or rating the pedagogic efficiency of a new technique of learning in the subject of alcoholism.

One of the major studies initiated during the early summer was a drinking-behaviour knowledge-attitude survey of leaders and non-leaders in three northern Alberta communities. Planned and designed by Dr. Richard Laskin, Research Associate, the project is being carried forward with the assistance of Mrs. Jean Veevers, Mr. Peter Nash, Miss Shelly Weisler, Miss Lynne Ross and Mr. Stanley King.

The first phase of this project was devoted to the planning of the

format, arrangement and content of a comprehensive questionnaire. Other segments of the project covered requests for vital-statistics type of information, the ranking of leadership qualities in community power structures within geographical areas, the rating of basic knowledge about drinking, the assessment of attitudes, and the evaluation of self-appraisals of personal drinking behaviour. It is anticipated that the conclusions of this study will be ready for publication by late fall.

Other short-range summer projects encompass a diversification of disciplines. Among these studies are:

1. Psychosomatic Illnesses of Spouses of Alcoholics: Mr. Marvin Weisler has been studying the case histories of certain hospital records for the purpose of analyzing emotional and comparable illness of the wives of alcoholics.
2. Coronary Attacks and Alcoholism: Mr. Weisler is making a brief survey of the literature on this topic. From all accounts, it appears there have been few studies relating to this topic *per se*.
3. Blood Distribution Flow and Liver Function in Drinking: Mr. Don James is using a medical approach—mainly physiological and spectrometric in nature—for his design and interpretation of this project.
4. College Curricular Offerings on Alcoholism and Allied Addictions: Mr. Robert McElman is surveying the accredited institutions of higher learning on

the American continent by means of questionnaires and curricular tabulations for the purpose of discovering the extent of didactic courses given regularly and/or at irregular intervals.

5. Programmed Instruction of Basic Concepts of Alcoholism: Mr. Stanley King is devising a unit of self-instruction on important concepts relating to problem drinking. This will have value for counselees at the Treatment Centre.
6. The Indian Alcoholic — His Social Characteristics: Mr. Christopher Sharplin, a Psychology-Sociology major at the University of Alberta, is comparing pertinent factors between and among family, first drinking group and other peers.
7. Constellation of Problems Surrounding Unmarried Multi-Problem Females: (in co-operation with Edmonton Welfare Council, The Foundation is co-sponsor of this joint project). Miss Shelly Weisler and Miss Lynne Ross are collaborating on this study. Mr. G. A. deCocq, Research Director of the Edmonton Welfare Council, has evinced a keen professional interest in the manifold problems in this area. Mr. deCocq, Dr. Laskin, Miss Weisler and Miss Ross have conferred many times concerning this investigation.
8. The Economics of Alcoholism: This overall community cost and incidence study is being examined by Mr. David Ross, Mr. William Reeves and Mr. Don Vassos.
9. An Investigation of Admissions to the Emergency Entrance of the Calgary General Hospital: This study by Mr. James Quan is being supervised by Mr.

NEW ZEALAND WRITES . . .

Ken Brasell, Secretary of the Mathews A.A. Group in Auckland, New Zealand, recently sent greetings and some kind comments on PROGRESS.

"(Colin B.) kindly lent me the March issue of PROGRESS to give me an introduction to you. I found it most interesting. I read parts of it to our group and they liked it very much. We liked PROGRESS because it is so simple to understand. That I think is essential to an alcoholic . . .

"Keep it simple, that's our motto. If we did not keep it simple it would be too complicated for us, and we would not be able to stay on the program. I don't think any of us alcoholics know why A.A. works, or how it works. But we do know that it does work . . . I have been in A.A. for 10 months and they have been the happiest 10 months of my life . . .

"We would appreciate it if you could put us on your mailing list for future issues of PROGRESS . . .

"Yours sincerely,
Ken Brasell."

Michael Orme, a Ph.D. candidate in psychology at the Stanford University.

10. The Degree of Extraversion Possessed by Two Types of Alcoholics—The Daily Excessive and the Bender Type: Miss M. Ward is completing a study of this project, which dovetails with one of her university courses in psychology.

The Research Student Development Program carried on during the summer proceeded well according to plan and will soon terminate. Students profited a great deal from attendance and participation in the day and evening group therapy sessions, and from the general discussions regarding treatment problems. Oral progress reports on particular topics were presented and group discussion followed. Addresses and seminars organized and conducted by staff contributed in large measure to the success of the summer program. Many students had the opportunity of engaging in group co-operative research, especially community survey work and evaluation. The team approach was also utilized in individually assigned projects, by two or three students pooling their efforts and being responsible for certain segments of a larger project.

The identification of research ability among high-calibre students requires a probing and appraisal of a constellation of characteristics comprising interests, personality factors, mental acumen and specific aptitudes. Some individuals show research promise at an early age. Others blossom forth at chronological and educational moments previously difficult to prognosticate.

This summer among a select group of budding researchers, we have been fortunate in having with us five medical students, besides two graduate students who are pursuing their specialties at Ph.D. level at leading American universities. The entire summer complement are Albertans either by birth or adoption. Without doubt, untold benefits will accrue to our Province from the training provided by The Foundation. Such training will ensure a measure of knowledge and competence that will lead to a significant professional growth and development.

COMING EVENT . . .

A.A.'s big 30th Anniversary International Convention will be held at Toronto, Ontario, (Canada) July 2, 3 and 4, 1965. While hotel reservations will not be accepted until after February 1, 1965, it's a good idea to start planning for your attendance now—one day at a time.

A TRIBUTE . . .

Many of The Foundation's employees give freely of their own time and unselfishly devote their various energies and skills to the furtherance of community welfare, cultural activities and juvenile sports.

This time, PROGRESS salutes Mr. James H. Rideout of the Edmonton Clinic Administrative staff for his work with the Sherwood Park All Star Senior Little League Baseball group. Jim took the 14 boys (aged 13 to 15 years) to Vancouver to play the first game of the World Series on August 8th.

"We were beaten by a superior team from Portland, Oregon," commented Jim, "but it was a good experience for all of us and we expect a stronger team next year."

Jim, a sports car buff from away back, also promotes the annual stock car races for Oak Hill Boys' Town at Bon Accord.

Good work, Jim!

The Executive Committee regrets to inform the friends of The Foundation of the resignation of the Executive Director, Mr. J. George Strachan, on August 24, 1964.

Mr. Strachan has made a most significant contribution to the field of alcoholism treatment and prevention during his eleven years of service with The Foundation. His interest in every aspect of alcohol problems has stimulated many citizens to constructive action.

Mr. S. A. Keays, who assumed the Presidency August 12, 1964, on Mr. John McGuckin's resignation for reasons of ill health, is acting in the capacity of Director at The Foundation pending a new appointment.

ALCOHOL: PRO AND CON

The discrepancies concerning alcohol attitudes can be best illustrated by a reply of a Carolina State Senator who had two constituents, one a Baptist Minister, the other a Bootlegger, both named Frank Cooper. One day the Senator received a letter from Cooper, c/o General Delivery, asking the Senator for his stand on Whiskey. This was his reply:

Dear Mr. Cooper:

I had not intended to discuss the controversial subject at this particular time. However, I want you to know that I do not shun a controversy. On the contrary, I will take a stand on any issue at any time, regardless of how fraught with controversy it may be. You have asked me how I feel about WHISKEY. Here is how I stand on this question. If, when you say Whiskey you mean the Devil's brew, the poison scourge, the bloody monster that defiles the innocent, de-thrones reason, destroys the home, creates misery and poverty—yes, literally takes the bread from the mouths of little children, if you mean the evil drink that topples the Christian man and woman from the pinnacles of righteous and gracious living into the bottomless pit, degradation and despair, shame and helplessness, then certainly I am against it with all my power.

But if when you say WHISKEY, you mean the oil of conversation, the philosophic wine, the ale that is consumed when good fellows get together, that puts a song in their hearts and laughter on their lips and a warm glow of contentment in their eyes; if you mean the Christmas Cheer; if you mean the stimulating drink that puts the spring in an old gentleman's step on a frosty morning; if you mean that drink of which the sale pours Millions of Dollars into our treasury, which are used to provide tender care for our little crippled children, our blind, our deaf and dumb, our pitiful aged and infirmed, to build good highways, hospitals and schools, then certainly I AM FOR IT.

This is my stand—I WILL NOT compromise.

Ashton Brisolara, Executive Director Committee on Alcoholism for Greater New Orleans.

(From an address to the Sixth Annual Pastoral Institute of The National Clergy Conference on Alcoholism)

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Publications Review

rather interesting amalgamation of Freud-Skinner; and Dr. Ferster discusses the principles necessary for an understanding and manipulation of human behaviour. To anyone involved in the manipulation of human behaviour, this book should be a welcome addition as it helps to place our activities on a scientific rather than metaphysical basis.

—Albert B. Valle

Gellman, Irving Peter, **THE SOBER ALCOHOLIC**. College and University Press, New Haven, Connecticut. 1964. Pp. 206.

PROGRESS invites concise reviews of books and other recent publications pertinent to the broad fields of alcoholism research, treatment, education, etc.

★ ★ ★ ★

Nurnberger, J. I., Ferster, C. B., & Brady, J. P. **AN INTRODUCTION TO THE SCIENCE OF HUMAN BEHAVIOR**. Appleton-Century-Crofts, New York, 1963. Pp. 379.

Within the past two decades the contributions of B. F. Skinner to psychology have had a very significant impact. This impact is now spreading to those areas of psychology which deal with personality development and therapeutic attempts to alter or modify human behaviour. R. Lundin's "Personality: An Experimental Approach", was the first attempt to view personality development and behavioural disorders from a rather strict behaviouristic position utilizing Skinner's system. The present book appears to be a further recognition and extension of this position into the area of psychiatry and clinical psychology.

The authors ask the question: "What is man and how did he get to be that way?" Dr. Brady discusses man's biological substrata and its relationship to behaviour; Dr. Nurnberger's chapters are a

An organizational analysis in which the author has dealt with the highly complex sociological phenomena of Alcoholics Anonymous in a very simple, readable style. Mr. Gellman has researched his material well and obviously has done more than merely observe "the group in action". Whether he realizes it or not his writings indicate that on occasion he was swept into the interaction of the group he writes about.

Three main areas of interest are analyzed: (1) Alcoholics Anonymous as a member of the vast complex of voluntary associations, (2) the unconventional character of A.A. in that the system of norms and values differs from that of the larger society within which it operates, (3) the unique characteristics of A.A. which contribute to its rehabilitative program in restoring problem drinkers to sobriety and enabling them to remain sober.

The author does not pretend to have all the answers as to why Alcoholics Anonymous works for so many problem drinkers, nor does he imply that the book tells the whole story of Alcoholics Anonymous. It does give the account of his experiences in one group in an honest, objective and forthright manner that is well worth reading.

—Hugh Smart

OTHER FOUNDATION SERVICES

- **ADVISORY SERVICES:**

Professional advice and assistance on the problems of alcoholism

- **AUDIO-VISUAL AIDS:**

Films, tapes, records and displays are available on loan

- **CONFERENCES and SEMINARS:**

To create a better understanding of the problems of alcoholism and methods of dealing with those problems

- **INDUSTRIAL WORKSHOPS:**

For the education of management, supervisory staffs and general employees in Alberta industry

- **ORIENTATION PROGRAMS:**

For nurses, doctors, internes, penal officials, personnel managers, social workers, clergymen, teachers and other groups

- **PUBLICATIONS:**

Progress, Digest on Alcohol Studies and original brochures and pamphlets

- **REFERENCE LIBRARY:**

Books, pamphlets and publications by authorities in the field of alcoholism

- **SPEAKERS' BUREAU:**

For professional, industrial, church, social, school, civic and other groups requesting information

The illustrations in Progress are by Harry Heine



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